



NEW HAMPSHIRE
DHHS
DEPARTMENT OF
HEALTH & HUMAN SERVICES

He-M 503, He-M 505

May 10th

Jess Gorton

Agenda

- He-M 503
- He-M 505

He-M 503



Background – HE-M 503

As BDS adjusts operations to align with direct bill and conflict of interest requirements, updates to He-M 503 are needed. These updates are expected to be final by August of 2023.

This presentation provides an overview of the key requirements in the proposed He-M 503 with an emphasis on areas that have changed from current practice.

We will cover:

- The sunseting of advanced crisis funding & waitlist
- Service Agreements
- The intake and service coordination timeline
- Waivers

Throughout this presentation, answers to some commonly asked questions will be provided in a blue banner along the bottom of the slide.

Has this rule been cross-walked with 171-A?

Yes! However, if you identify a point of contradiction between this rule and 171-A, submit a formal comment on the rule in June.

Service Agreements (ISA)

Service Agreement Types

- The “basic” and “expanded” ISA will no longer exist as distinct items for service coordinators to create.
- Specific components that must be included in a service plan are listed in He-M 503. These required elements include, but are not limited to:
 - Information about the individual’s strengths, interests, capacities, disabilities, and needs
 - Information about the individual’s goals
 - Service frequency, scope, and duration as well the relationship between services and goals
 - Rendering provider
 - Guardianship/ Rep Payee information
 - Criteria for transfer to a less restrictive setting
 - Demographics
 - Personal Profile

Service Agreement Components

- From July – December of 2023, service coordinators should upload the ISA export from HRST in NH Easy.
- By 2024, the ISA template will exist as a series of screens in NH Easy.
- When completing an ISA, the service coordinator, in collaboration with the individual, must exercise discretion to determine what relevant information from a person’s planning process to document in the ISA.

Service Agreement Finalization

- Within 5 days of completing an ISA, the service coordinator must send the signed ISA to the individual.
- The individual has 10 business days to respond. If no response is received, approval is assumed.
- Once the individual has approved the service agreement, the service coordinator should finalize the ISA within NH Easy by uploading a copy into the NH Easy system. (This is an operational step that is necessary, but not referred to explicitly in He-M 503).

The proposed HE-M 503 deletes the definition for Personal Profile. How will service coordinators know what to include?

The definition was made less specific, but not taken out of the rule entirely. Additionally, in the service planning portion of the rule (He-M 503.09) there is additional information about personal profile components.

Do all providers need to be contacted during the service planning process?

Yes! This is a current requirement that will continue.

The Area Agency no longer has any role in approving service agreements?

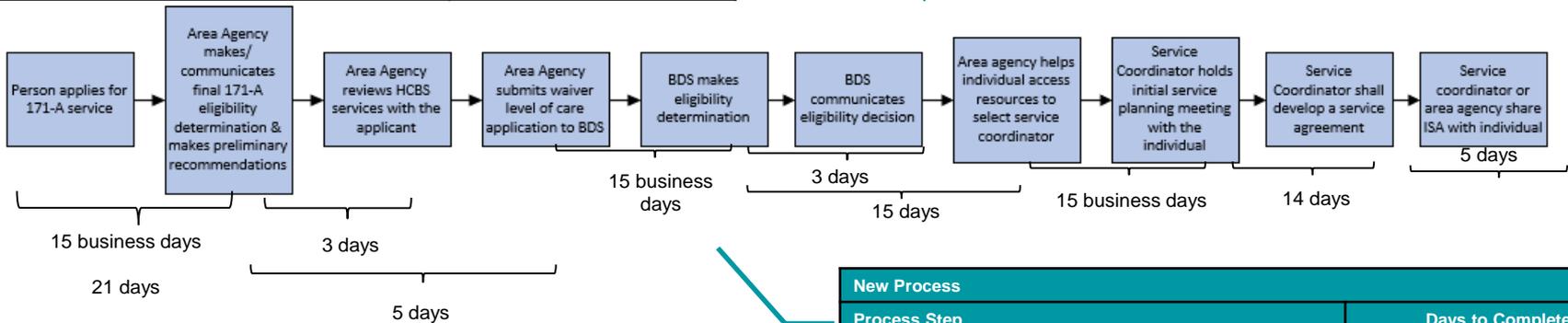
No. Service coordinators will submit plans directly to BDS using NH Easy.

Proposed Timeline

Prospective Individual: Mark

- 26 years old, has Medicaid, seeking service coordination and supported employment

Old Process	
Process Step	Days to Complete
Application, Recommendations, 171-A Eligibility	42
SC holds a planning meeting	Included in intake timeline
AA submits PA and LOC, BDS determines waiver eligibility	27 Days
SC develops basic SA	14 Days
<i>Pause until services begin</i>	Undefined
ISA meeting held, written, submitted	35 Days
Total	118 Days



New Process	
Process Step	Days to Complete
Application, Recommendations, 171-A Eligibility, Review HCBS	37 Days
AA submits LOC, BDS determines waiver eligibility	24 Days
AA informs SC selection	12 Days
<i>Pause until SC is selected</i>	Undefined
ISA meeting held, written, submitted	40 Days
Total	113 Days

Timeline Takeaways

- Days, if not specified, are calendar days.
- The “clock” will start once an area agency determines that an application is complete
- Area agency staff must have a conversation with individuals, upon intake, about what services might be appropriate for that person.
- BDS recommends that area agencies consider operationalizing this requirement as a part of the initial intake conversation with prospective service recipients.
- BDS does not expect to require documentation of these preliminary recommendations into NH Easy, but expects area agencies to be able to maintain a record of the preliminary recommendation in the individual’s file, along with other intake notes.
- Area agencies still have 15 business days to make final 171-A eligibility determinations.
- Steps related to waiver (HCBS) eligibility and 171-A eligibility have been separated. Within approximately a week of 171-A determination, an area agency should help an individual review waiver services and apply for the waiver.
- To clarify lines of responsibilities between area agency staff and service coordinators, a new requirement exists regarding the timing of service coordinator selection. Area agencies must help an individual access resources to select a service coordinator approximately two weeks after a waiver eligibility determination is made by BDS.
- Service coordinators will still have two weeks to develop the ISA and approximately 30 days after waiver eligibility determination to hold an initial service coordination meeting.

Preliminary planning implies the person is eligible and shouldn't be done until later.

This is a 171-A requirement. Preliminary planning is different than service planning.

Who will be responsible for the person's full file?

Each entity is responsible for the information pertaining to them and the services they provide. There will no longer be a "master file" for an individual

Area agencies are removed from the monitoring process. How will they carry out their responsibilities?

Area Agency functions are detailed in He-M 505. Additionally, dashboarding functionalities in NH Easy will help area agencies monitor things like ISA timeliness and completion rates in their regions.

Advanced Crisis Funding, Waitlist Funding & Waivers

Advanced Crisis

- Advanced crisis funding and the associated area agency driven process will no longer exist.
- Instead, service coordinators should follow the Crisis Policy to request crisis funds.
- The service coordinator, not the area agency, will be the requester of crisis funding.

Waitlist

- The waitlist registry is being updated in NH Easy.
- Area agencies will no longer use the registry to document an estimate of the funds an individual needs. Service coordinators should not expect to calculate individual funding amounts outside of the budget template.

Waivers

- Area agencies will no longer need to sign waiver requests

Will area agencies no longer sign off on waivers?

In current process, the Department still has the final approval of all waiver requests. This will no longer be an AA function when they do not subcontract with vendors.

Provider agencies will submit waivers on their own behalf.

He-M 505



Background – HE-M 505

As BDS adjusts operations to align with direct bill and conflict of interest requirements and creates a new funding structure for area agencies, updates to He-M 505 are needed. These updates are expected to be final by August of 2023.

This presentation provides an overview of the key area agency requirements in the proposed He-M 505 that impact service coordinators. Service coordinators should expect support from area agencies in the following (non-exhaustive) areas:

- Intake/ Service Planning
- Crisis Management and Mitigation
- Trainings

Throughout this presentation, answers to some commonly asked questions will be provided in a blue banner along the bottom of the slide.

Will the public be able to react to He-M 503, He-M 504, and He-M 505 all at once?

BDS understands the desire to review proposed rule changes together as many rules intersect. There will be time to send in additional public comments during the formal public comment period.

Intake/ Service Planning

Intake/ Eligibility

- Area agencies are responsible for “managing and completing intake and eligibility activities for individuals...” This means that area agencies will continue to complete RSA 171-A, He-M 522 eligibility checks, enter registry information (though in an updated way), and complete the individual’s initial functional screen (waiver eligibility).
- Area agencies must also “develop and manage initial service planning and access to supports” for individuals. This means that area agencies should help an individual connect with their selected service coordinator or possibly schedule a SIS or HRST while the individual is reviewing and selecting a service coordinator.
- Once a service coordinator is identified, the area agency moves into a service system monitoring role.

Ongoing Service System Monitoring

- Area agencies will use NH Easy dashboards to monitor the timeliness of completion service agreements in their region
- Area agencies will complete annual service file reviews to monitor the provision of services

Will area agencies have access to the information needed to complete their He-M 505 activities?

Yes. Service coordinators and providers must share information with area agencies if the information is related to an area agency function.

Crisis (Critical Incident) Management

Critical Incident Management

- Area agencies are responsible for providing technical assistance when a service coordinator reaches out for advice with crisis mitigation
- Area agencies must also be available 24/7 to provide critical incident assistance
- Area agencies are responsible for helping service coordinators with coordination, logistical, and subject-matter expertise support
- Area agencies must expedite intake and eligibility support for anyone who is in a crisis but not yet “known” to the service system

What does area agency 24/7 availability look like in crisis situations?

The AA needs to be available to respond directly to the crisis, as would the SC. Typical after-hours calls do not warrant an in-person visit however the response would depend on the situation as presented.

People need one point of contact for crisis management. Can the rules identify this lead?

The service coordinator will be the lead during a crisis. Service coordination entities will be required to have 24/7 availability to respond in a crisis, which will be outlined in He-M 504. This process will also be outlined within the new crisis policy

Trainings

Area Agency Training Delivery Expectations

- Provide at least one sentinel event/ restraint and seclusion/mortality trends training is delivered per state fiscal year
- Provide at least two advocacy/individual rights trainings per year
- Provide training to providers about medication administration trends

**Who will be required to go to the advocacy trainings?
Will the trainings be specifically for self-advocacy
organizations or family-advocacy organizations?**

The trainings will not be mandatory. The AA will be responsible for ensuring two trainings are delivered and open to those who would like to attend



NEW HAMPSHIRE

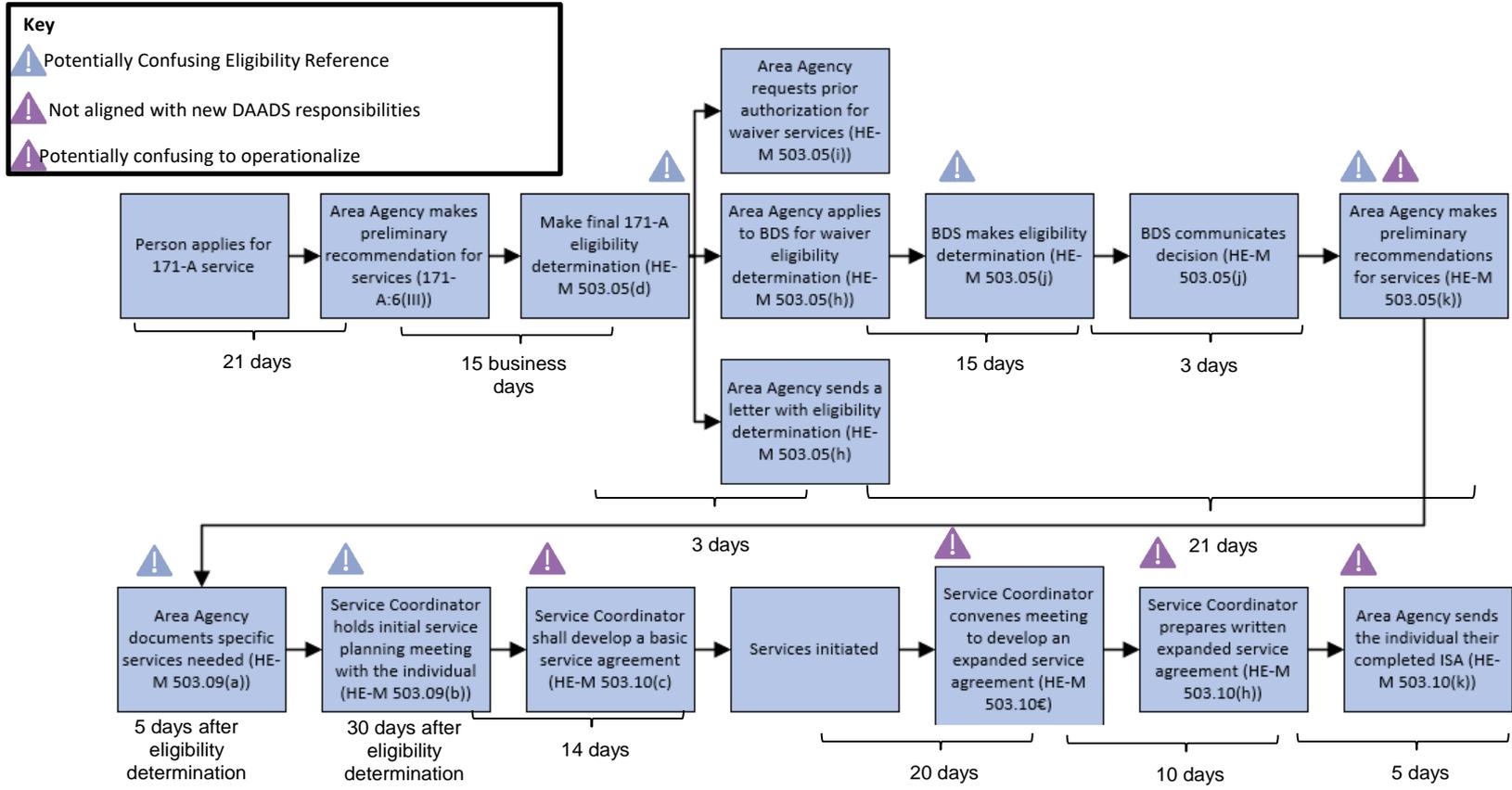
DHHS

DEPARTMENT OF

HEALTH & HUMAN SERVICES

Appendix

Current Intake Timeline



Proposed Revisions as of 12/8 | Intake and Eligibility

16

Proposal

- Clarify 171-A eligibility and waiver eligibility parameters (He-M 503.03)
- Add area agency authority to determine when an application for 171-A eligibility is “complete” and reducing the need for an extension process (He-M 503.05(d)-(i))

Proposed Process Illustration

Person applies for
171-A service

The Bottom Line for Staff

- The “clock” will start once an area agency determines that an application is complete.

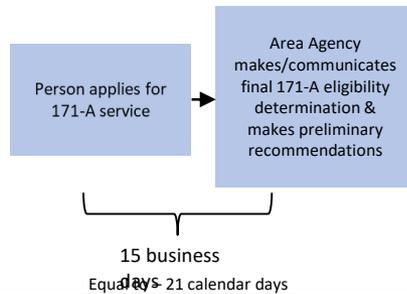
Proposed Revisions as of 12/8 | Intake and Eligibility

17

Proposal

- Add a requirement, in alignment with 171-A and DAADS functions, that area agencies complete a preliminary recommendation for services within 21 days of application submission (completion) (He-M 503.05)

Proposed Process Illustration



The Bottom Line for Staff

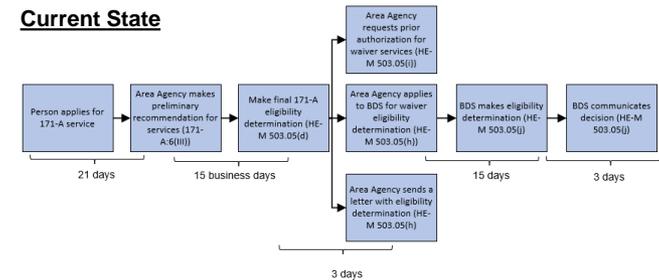
- Area agency staff must have a conversation with individuals, upon intake, about what services might be appropriate for that person.
- BDS recommends that area agencies consider operationalizing this requirement as a part of the initial intake conversation with prospective service recipients.
- BDS does not expect to require documentation of these preliminary recommendations into NH Easy, but expects area agencies to be able to produce a record of the preliminary recommendation if requested during an audit.

Proposed Revisions as of 12/8 | Intake and Eligibility

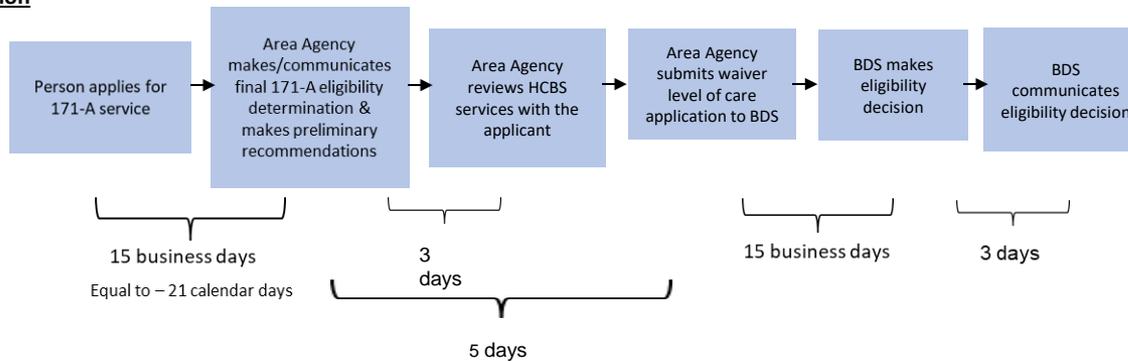
Clarified and updated intake timelines as follows (He-M 503.05):

- 171-A Eligibility Determination -> DD Waiver service overview | 3 days
- 171-A Eligibility Determination -> "Functional Screen" Submission | 5 days
- Functional Screen Submission -> BDS Waiver eligibility determination | 15 days

Current State



Proposed Process Illustration



The Bottom Line for Staff

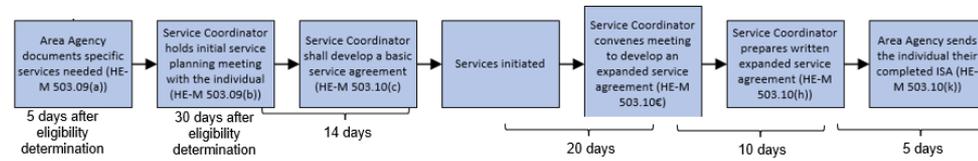
- Area agencies still have 15 business days to make final 171-A eligibility determinations.
- Steps related to waiver (HCBS) eligibility and 171-A eligibility have been separated. Within approximately a week of 171-A determination, an area agency should help an individual review waiver services and apply for the waiver.

Proposed Revisions as of 12/8 | Service Coordination

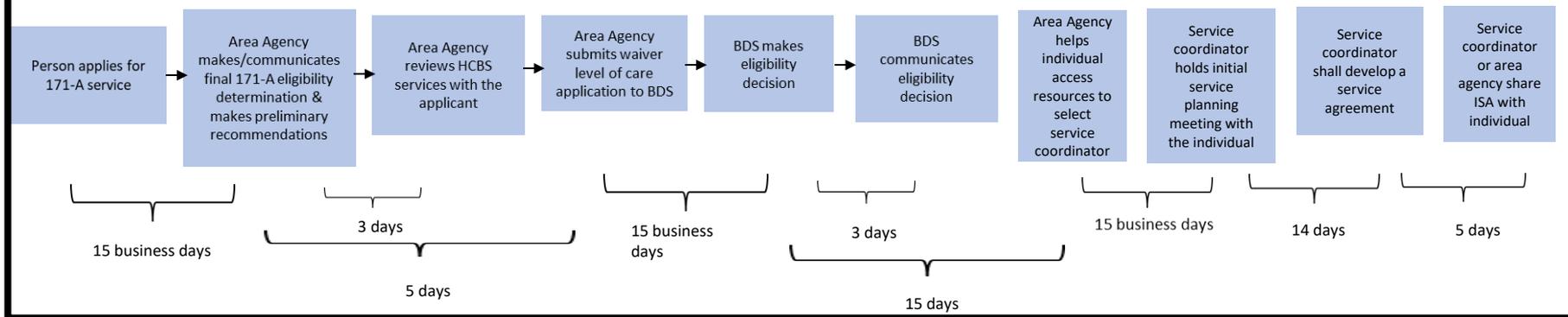
Update service coordination timelines as follows (HE-M 503.09):

- Waiver Eligibility Determination -> Service Coordinator Selection | 15 days
- Service Coordinator Selection and Acceptance -> Initial Person-Centered Planning Meeting | 15 business days
- Initial Person-Centered Planning Meeting -> ISA Completion | 14 days (HE-M 503.10(c))

Current State



Proposed Process Illustration



The Bottom Line for Staff

- The process will no longer have a potential pause in activity when services are initiating.
- To clarify lines of responsibilities between area agency staff and service coordinators, a new requirement exists regarding the timing of service coordinator selection. Area agencies must help an individual access resources to select a service coordinator approximately two weeks after a waiver eligibility determination is made by BDS.
- Service coordinators will still have two weeks to develop the ISA and approximately 30 days after eligibility to hold an initial service coordination meeting.